PATENT APPLICATION FEE DETERMINATION RECORD Effective December ₹, 2004

Application or Docket Number

| CLAIMS | AS | FIL | .ED | - F | ART |
|--------|----|-----|-----|-----|-----|
|--------|----|-----|-----|-----|-----|

| | | CLAIMS | AS FILED - I | PARTI | | | | - | | |
|--|---------------------------------------|---|---------------|---|------------------------|-------------------|------------------------|-------|---------------------|------------------------|
| | · · · · · · · · · · · · · · · · · · · | —————————————————————————————————————— | (Colu | umn 1) | (Column 2) | SMAL | L ENTITY | OF | R LARGE | ENTITY |
| U.S | . NATIONAL | STAGE FEES | | | | RATE | FEE | 7 | RATE | FE |
| BASIC FEE | | | | | | BASIC FEE | | OF | BASIC FEE | 100 |
| EXAMINATION FEE | | | | | | EXAM. FEE | | 7 | EXAM. FEE | 202 |
| SEARCH FEE | | | | | | SEARCH FE | E . | 1 | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | . minu: | minus 100 = | | X \$ 125 | . | | X \$ 250 = | 700 |
| TOTAL CHARGEABLE CLAIMS | | | 14 minu | us 20 = | | X \$ 25 = | : | OR | | - |
| INDEPENDENT CLAIMS | | | / mir | nus 3 = - | // | X \$ 100 | | OR | | 20 |
| MUL | TIPLE DEPEN | IDENT CLAIM PRE | SENT (| <u>-</u> - | / | + \$ 180 : | | OR | | 100 |
| If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | TOTAL | | OR | TOTAL | 1/000 | |
| | <u> </u> | CLAIMS AS A | AMENDED - | PART II (Column | 2) (Column 3) | SMALL | ENTITY | OR | OTHER SMALL E | |
| AMENDMENT A | % | REMAINING AFTER AMENDMENT | | PAID FO | R PRESENT SLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI TIONA FEE |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = . | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST-PRES | SENTATION OF MI | JLTIPLE DEPEN | IDENT CLA | IM 🗍 | + \$ 180 = | | OR | + \$ 360 = | |
| | · · · · · · · · · · · · · · · · · · · | | | | | TOTAL ADDI FEE | Г. | OR | TOTAL ADDIT. FEE | 1. |
| AMENDMENT B | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column: HIGHEST NUMBER PREVIOUS PAID FOR | PRESENT LY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus 🥌 | ** | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | X \$ 100 = | | OR | X \$ 200 ≓ | |
| | FIRST PRES | ENTATION OF MU | ILTIPLE DEPEN | DENT CLAI | м | + \$ 180 = | | OR | + \$ 360 = | <u> </u> |
| | | | | | | TOTAL ADDIT | | L | TOTAL ADDIT. FEE | |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3'.

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.